



## **OFFICIAL**

## **FAX TRANSMITTAL MEMO**

TO:	COMPANY:	FAX #: 703-872-9306		
Commissioner for Patents	U.S. Patent & Trademark Office			
communication unless you are the intended a diseard all copies.	al and/or privileged information intended only for the addressee. Duddressee. If you have received this communication in error, please  May 3, 2005	Reviewed and		
DATE: FROM:	Lawrence H. Meier	approved for facsimile		
OPERATOR:	Karen Jeffer	transmission by:		
CLIENT/MATTER:	08511-01CT1			
PAGES:	2 (including cover)			

The original will not be sent. If the copy is illegible or incomplete, please call the operator at <u>Direct: (802) 846-8318.</u>

Comments

BTV.255986.1

COURTHOUSE PLAZA = 199 MAIN STREET = PO BOX 190 = BURLINGTON, VT = 05402-0190 = T: +1.802.863.2375 = F: +1.802.862.7512 BURLINGTON, VT = ST. JOHNSBURY, VT = BRATTLEBORO, VT = MONTPELIER, VT = LITTLETON, NH = WWW.DRM.COM

PAGE 1/2 \* RCVD AT 5/3/2005 4:47:22 PM [Eastern Daylight Time] \* SVR:USPTO-EFXRF-1/3 \* DNIS:8729305 \* CSID:802 864 4906 \* DURATION (mm-ss):00-52

PTO/SR/83 (04-05)
Approved for use through 11/30/2005. OMB 0851-0035
U.S. Patent and Trademark Office, U.S. DEPARTMENT OF COMMERCE

U.S. Petent and Trademark Office, U.S. DEPARTMENT OF COMMERCE
Under the Peperwork Reduction Act of 1995, no persons are regulared to respond to a collection of information unless it displays a valid OMB control number.

## REQUEST FOR WITHDRAWAL AS ATTORNEY OR AGENT AND CHANGE OF CORRESPONDENCE ADDRESS

Application Number	10/763,742	
Filing Date	January 23, 2004	
First Named Inventor	David J. Dodge	
Art Unit	3728	
Examiner Name	Marie D. Patterson	
Attorney Docket Number	08511-01CT1	

To: Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450										
Please	Please withdraw me as attorney or agent for the above identified patent application, and									
	the attorneys/agents (with registration numbers) listed on the attached paper(s), or									
	the attorneys/agents associated with Customer Number									
NOTE: This box can only be checked when the power of attorney of record in the application is to all the practitioners associated with a customer number.										
The reaso	ns for this requ	est are: Assignee requested t	his applic	ation be	forwarde	d to new	<b>co</b> unse	for futu	ire pros	secution.
CORRESPONDENCE ADDRESS										
The correspondence address is NOT affected by this withdrawal.  Change the correspondence address and direct all future correspondence to:  The address associated with Customer Number:										
• • • • • • • • • • • • • • • • • • • •	Firm or Thomas M. Freiburger									
Address   S5 Main Street, Suite 200   P.O. Box 1028										
City		Tiburon		State	CA				Zip	94920
Country United States of America										
Telephone 415-435-0240				Email						
Signature	James	e 14. Zuin								
Name	19 Lawrence H. Meier			Registration No.		31,446				
Date	37~	3 7my 2005				Telephone No. (802) 863-2375				
NOTE: Withdrawel is effective when approved rather than when received. Unless there are at least 30 days between approval of withdrawel and the expiration date of a time period for response or cossible extension certod, the request to withdraw is normality disapproved.										

This collection of Information is required by 37 CFR 1.36. The information is required to obtain or retain a banefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.9.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent on the amount of time you require to commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, cell 1-800-PTO-9199 and select option 2.